

Department of Veterans Affairs  
Federal Supply Service  
Authorized Federal Supply Schedule Price List  
**Effective Date: 06/01/2012**  
**Modification #**\_\_\_\_\_

*On-line access to contract ordering information, terms and conditions, up-to-date pricing, and the option to create an electronic delivery order are available through GSA Advantage!™, a menu-driven database system. The Internet address for GSA Advantage!™ is: [www.GSAAdvantage.gov](http://www.GSAAdvantage.gov)*

**Federal Supply Schedule (FSS) 621 I**  
**Professional & Allied Healthcare Staffing Services**

Product Service Code Q  
**Contract #: V797P-2173D**

*For more information on ordering from Federal Supply Schedules click on the FSS Schedules at <http://www.fss.gsa.gov>*

Contract Period: 06/01/2012 through 05/31/2017

*Contractor Name:* **Codemed, Inc**

*Company Address:* **8939 S Sepulveda Blvd, Ste 302  
Los Angeles, CA 90045**

*Company Website:* [www.codemed-inc.com](http://www.codemed-inc.com)

**Primary Contact:** Patricia Johnson; [gsacontract@codemed-inc.com](mailto:gsacontract@codemed-inc.com)

**Alternative Contact:** Sandra Villalobos; [Sandra@codemed-inc.com](mailto:Sandra@codemed-inc.com)

Phone# **(310)645-9415**

Fax# **(310)645-9415**

Business Size: Woman Owned Small Business  
Data Universal Number System (DUNS) Number: **123627981**  
Central Contractor Registration (CCR) Cage Code: 4DUG2

## Customer Information:

1. **Table of awarded special item number(s):**

| <b>SIN 621-</b> | <b>Description</b>   |
|-----------------|--|
| 099             | Introduction of New Products/Services (INS) (Includes Categories and Subcategories)                                  |
| 039             | Medical Assistant (Certified /Registered) Medical Record Clerk<br>Medical Record Technician Medical Transcriptionist |
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2. **Maximum order:** \$1,000,000 per order.
3. **Minimum order:** 3 Months. No Permanent Placement fees and the Cancellation for Convenience of the Government clause applies.
4. **Geographic coverage (service area):** California
5. **Prompt Payment Terms:** Net 30 Days. Invoiced and submitted to ordering facility 30 days in arrears.
6. **Government Commercial Credit Card:** Yes, the offeror accepts credit cards. Yes, will accept cc orders at or above \$3,000.00.
7. **Ordering address:** 8939 S Sepulveda Blvd, Ste 302, Los Angeles, CA 90045
8. **Payment address:** 8939 S Sepulveda Blvd, Ste 302, Los Angeles, CA 90045
9. Prices shown herein are “net” ceiling prices-not to exceed rates. The net ceiling rates include malpractice insurance for non-personal services task-orders and **exclude travel and lodging**. Personal Services task-orders will also be accepted. See page **3 of this price list**.
10. **Minimum Qualifications of Professionals:** See pages **3 through 5 of this price list**.
11. **Medical Liability Insurance Limits:** \$2,000,000 per occurrence; \$2,000,000 aggregate.
12. **Ordering Procedures:** For services, the ordering procedures, information on Blanket Purchase Agreements (BPA’s), are found in the Federal Acquisition Regulation (FAR) 8.405-3.

## Codemed, Inc Not to Exceed Hourly Rates

| SIN 621- | Position Description       | FSS Net Ceiling w/ IFF Hourly Price |
|----------|----------------------------|-------------------------------------|
| 099      | Coding Audit and Education | \$106.16                            |
| 039      | Inpatient Medical Coder    | \$63.81                             |
| 039      | Medical Clerk              | \$26.65                             |
| 039      | Outpatient Medical Coder   | \$56.93                             |
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**Note:** Rates shown are ceiling rates, including malpractice insurance. The rates shown exclude lodging and transportation charges.

### Shift Differentials: None

**Work Week:** Sunday – Saturday

**Overtime Rate(s):** 1.4x hourly rate for all hours over 40 hours per week. If local labor laws differ, it will be the responsibility of the Vendor to pay and not billable to the government other than the 1.4x hourly rate.

**Holiday Rate(s):** Straight time paid. No premium pay.

**On-Call Rate(s):** None

**Call Back Rate(s):** None

### Coding Auditing and Education

#### *Essential Functions / Major Responsibilities::*

Under general supervision, evaluates documentation and quality coding reviews on inpatient and outpatient medical records to validate the ICD-9-CI:v1, CPT, and HCPCS Level II codes, modifier, MSD-DRGs, .APCs assignments to ensure Compliance with Official Coding Guidelines, CMS, and facility internal coding policies and procedures, and respective other regulatory agencies. Continuously evaluates the quality of clinical documentation to spot incomplete or inconsistent patient medical record documentation that impact the code selection and resulting MS-DRG/APC groups and payment. Brings identified concerns to the HIM department managers for resolution. Provides and arranges for training of facility healthcare professionals use of coding guidelines and practices, proper documentation techniques, medical terminology and disease processes, appropriate to the job description and function as it relates t:) the MS-DRG APC assignments and other outpatient data quality management factors. Develops reports and collects and prepares data for studies involving inpatient/ outpatient data for clinical

evaluation purposes and/or financial impact and profitability. Keeps abreast about transaction code sets, HIPAA requirements, and other future issues impacting the coding function. Demonstrates competency in the use of computer applications and APC/MS-DRG Groupers.

*Minimum Qualifications and Education:*

- Possession of a Registered Health Information Administrator (RHIA), or Registered Health Information Technician (RHIT) certifications along with a Certified Coding Specialist (CCS) designation by the American Health Information Management Association (AHIMA).
- Must have minimum of five years progressive coding or coding review experience in
- ICD-9-CM and ICD-9-CM, CPT /HCPCS with claims processing data management responsibilities.
- Good oral and written communication skills and comprehensive knowledge of the Ms-DRG/ APC structures and regulatory requirements.

**Inpatient Medical Coder**

*Essential functions/Major Responsibilities:*

Under general supervision, codes and abstracts inpatient medical records for all third party payers including Medicare and Medicaid. Works from the appropriate documentation in the medical record, utilizes Classification systems which include but are not limited to ICD-9-CM, and CPT coding classification systems. All work is performed in accordance with Official Coding Guidelines, Coding Clinic, CMS and facility internal coding policies and procedures. Utilizes encoder and coding reference materials, maintains disease, operations, and physician indices and completes edit lists from internal and external database.

*Minimum Qualifications and Education:*

- Possession of Certified Coding Specialist (CCS) designation by the American Health
- Information Management Association (AHIMA).
- Must have at least two year of continuous relevant experience of inpatient coding within the last five years and successfully pass CODEMED's coding examination.
- School Diploma or GED

**Medical Clerk**

*Essential Functions / Major Responsibilities:*

Maintains accurate records for quick information retrieval within a healthcare facility or medical office. Classifies, sorts, retrieves and updates office information upon request. Examines and codes incoming material numerically, alphabetically or by subject matter. Stores hard copy or computerized forms, letters, receipts, or reports. Duties may include word processing, sorting mail and operating general office equipment.

*Minimum Qualifications and Education:*

- 2 years of experience in the field
- High School Diploma or GED

## **Outpatient Medical Coder**

### *Essential Functions / Major Responsibilities:*

Under general supervision, codes and abstracts outpatient medical records for all third party payers including Medicare and Medical. Works from the appropriate documentation in the medical record, utilizes classification systems which include but are not limited to ICD-9-CM, and CPT coding classification systems. All work is performed in accordance with Official Coding Guidelines, Coding Clinic, CPT Assistant, CMS and facility, internal coding policies and procedures. Utilizes encoder and coding reference materials, maintains disease, operations, and physician indices and completes edit lists from internal and external database.

### *Minimum Qualifications and Education:*

- Possession of Certified Coding Specialist (CCS) or Certified Coder Specialist, Physician Based (CCS-P) designation by the American Health Information, Management Association (AHIMA).
- Must have at least two year of continuous relevant experience of inpatient coding within the last five years and successfully pass CODEMED's coding examination.
- • 2 years of experience in the field
- • High School Diploma or GED